SAGES
Cleveland, Ohio
2024

LAP- ASSISTED WHIPPLES PANCREATODUODENECTOMY
EARLY EXPERIENCE FROM A TERTIARY CARE CENTRE

Asuri Krishna, Abhinav Kumar, Sushant Soren; Virendra K Bansal; V Seenu;
All India Institute Of Medical Sciences, New Delhi

Introduction

- Whipple's Pancreatico-duodenectomy- treats various pancreatic and periampullary disorders.
- Laparoscopy and minimal invasive surgeries-enhances post operative recovery compare to open surgery
- Extensive learning curve due to their complex nature
- Which can increase risk of complication
- LAPD , A hybrid procedure combing laparoscopic resection and reconstruction under small incision
- Alternative on the road to matured application of TLPD

Materials and method

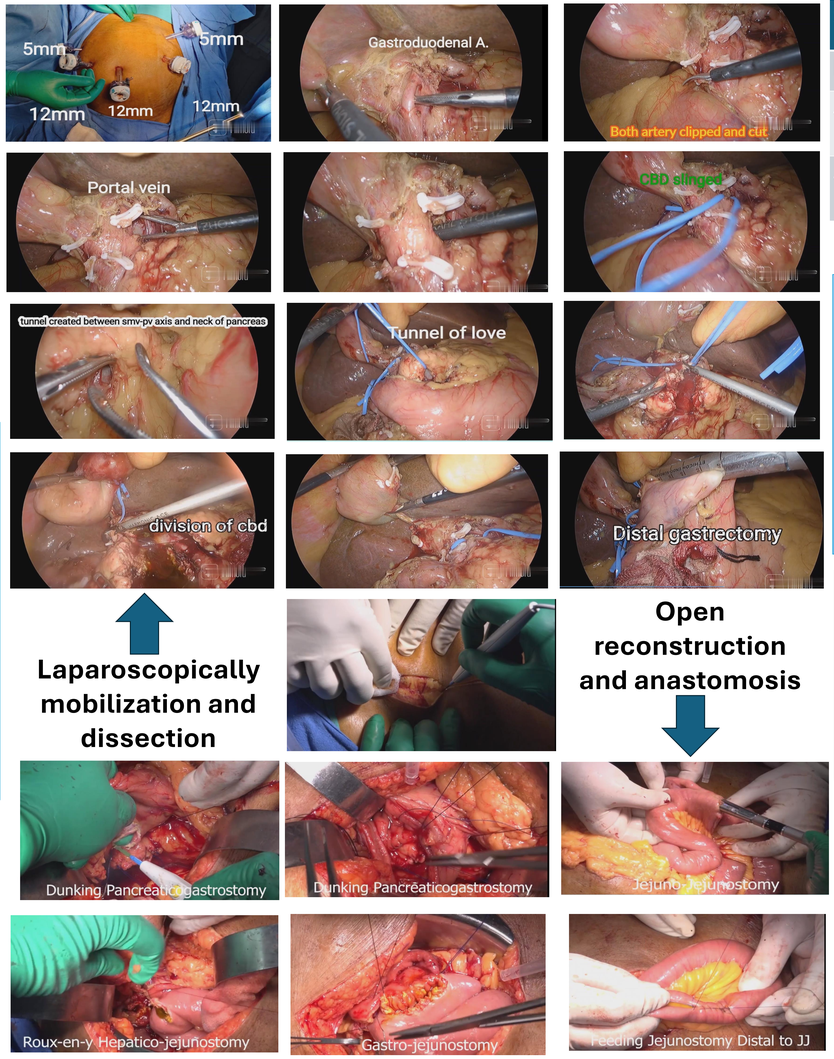
Retrospective analysis of prospective collected database of LAPD

- ❑ Data collected between 2020-2023
- ❑ Demographic profile, imaging characteristics, proven pancreatic lesion or other condition requiring Whipple's procedure included in study
- ❑ Surgical strategy, operative complication ,operative time and post operative morbidity and complication was evaluated
- ❑ All patient underwent diagnostic laparoscopy and Standard LAPD

Preoperative preparation

- ❑ NPO – 6 to 8 hours
- ❑ General anaesthesia
- ❑ Antibiotic prophylaxis - continued 48 hours post-op
- ❑ NG insertion, Urinary catheterization

Steps of surgery



Clinical symptoms

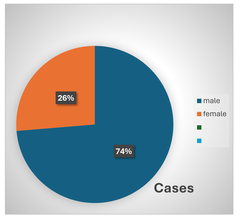
SYMPTOM	N (percentage)
Pain	4 (19.04)
Jaundice + Pain	5 (23.80)
Jaundice	12 (57.14)

Results

Demographic profile

- Total number of cases was twentyone
- Male to female ratio was 2:1 (14:7)
- Mean age was 51 years





Intraoperative	Total 21
Mean opearative time	235 minutes (220-360)
Mean Blood loss	447ml(300-1lit)
Conversion	3
PJ: PG	3:18

Complication

Post operative Data	Total patient-21
Surgical site infection	5
Burst abdomen	4
Delayed gastric emptying	3
Chyle leak	2
Pancreatic fistula	0
Bleeding	3
Mortality	1
Mean hospital stay	14 days (8-40)

Histopathology	
Moderately differentiated adenocarcinoma Head of pancreas	6
Ampullary variety adenocarcionoma	10
Distal CBD cholangiocarcinoma	3
SPEN	1
Gastrinoma in region of head of pancreas	1

Conclusion

- LAPD is safe and feasible treatment for pancreatic and periampullary carcinoma with good results
- Potential advantage of LAPD include more precise mobilization and dissection compared to OPD
- Another advantage compare to TLPD is more precise reconstruction and hemostatsis